L22000203884

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(======,
(Document Number)
(Document Number)
Contilled Coales Contilled to a Cont
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800387880998

05/23/22--01014--024 **25.00

SECRETARY OF STATE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Heavy Metal Mobil Diesel Repair LLC

2022 MAY 23 AM 10: 55

The Articles of Organization for this Limited Liab	Florida Limited Liability Company) SECKETARY OF STATE TALLAHASSEE, FL and assigned
Florida document number 1.22000203884	
riorida document number	·
This amendment is submitted to amend the follow	ring:
A. If amending name, enter the new name of the	he limited liability company here:
Heavy Metal Mobile Diesel Repair LLC	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
	istered office address on our records, <u>enter the name of the new registere</u> here:
agent and/or the new registered office address	
Name of New Registered Agent:	
agent and/or the new registered office address	
Name of New Registered Agent:	Enter Florida street address
Name of New Registered Agent:	here:
Name of New Registered Agent:	Enter Florida street address
Name of New Registered Agent: New Registered Office Address: New Registered Office Address:	Enter Florida street address , Florida City Zip Code
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered accept the appointment as registered provisions of all statutes relative to the proper	Enter Florida street address Florida City Zip Code gistered Agent: agent and agree to act in this capacity. I further agree to comply with the and complete performance of my duties, and I am familiar with and
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registered.	Enter Florida street address Florida City Zip Code gistered Agent: agent and agree to act in this capacity. I further agree to comply with the and complete performance of my duties, and I am familiar with and ered agent as provided for in Chapter 605, F.S. Or, if this document is
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the registered accept the obligations.	Enter Florida street address
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registered.	Enter Florida street address
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the registered accept the obligations.	Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Sheldon Williams	8513 Tourmaline Blvd	■Add
		Boynton Beach, FL 33472	□ Remove
			□Change
			□Remove
			□Change
			DAdd
			□Remove
			□Change
			
			⊐Remove
			Change
			□Add
			ПRетоve
			
			□Add
			□Remove
			□ Change

·			<u></u>		 	·				
	<u> </u>		 .		·					
 	• • • • • • • • • • • • • • • • • • • •	-		,		·				
				-						
										
								THS	2022	
							==		X A	
						-	,	AHAS	23	
								SE SE	2	m
								in en	- <u>ë</u>	
								二五五	S	
					-		· · ·	· · · · · ·		_
	 									
							<u> </u>			
iffective date, i	f other than	the date of	filing:				(opti	onal)		
f an effective date i	if other than to slisted, the date inserted in this	must be specif	ic and canno	t be prior to	date of filing	or more than	90 days afte	r filing.) Pur is date will	suant to	605.0207 listed as
Note: If the date					ic statutory	mig requi	rements. th	3 date Will	1101 00	noted do
Note: If the date										
Note: If the date document's effect	a delayed affa	ctive date, bu	it not an ef	fective time	e, at 12:01 a	i.m. on the	earlier of: (7) The 90	th day a	ifter the
Note: If the date locument's effect record specifies	a uciayed cite									
Note: If the date	a uciayed effe									
Note: If the date document's effect effect is record specifies d is filed.										
Note: If the date document's effect record specifies d is filed. May 19th.	. 2022									
Note: If the date document's effect record specifies d is filed. May 19th.			 :							